# P20000015116

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
<u></u>





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2020 SEP 28 AM 9: 51

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## CORPORATE ACCESS, '\_

When you need ACCESS to the world

'INC.

236 East 6th Avenue. Tallahassee, Florida 32303 P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666

### **WALK IN**

x	CERTIFIED COP	Υ	
]	РНОТОСОРУ		
	CUS		
x	FILING	INC.	
Т	HACH BATTERY	VENTURES, INC.	
(C	ORPORATE NAME AND	DOCUMENT #)	
(C	CORPORATE NAME AND	DOCUMENT #)	
(C	ORPORATE NAME AND	DOCUMENT #)	
(C	ORPORATE NAME AND	OCUMENT #)	
(C	ORPORATE NAME AND	OCUMENT #)	
(C	ORPORATE NAME AND	OCUMENT #)	

#### **COVER LETTER**

Department of State New Filing Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

	Thach Battery Venture	s, Inc.	
SUBJECT:	(PROPOSED CORPORA	TE NAME - MUST INCL	<u>UDE SUFFIX</u> )
Enclosed are an orig	inal and one (1) copy of the art	icles of incorporation and	l a check for:
□ \$70.00 Filing Fee	□ \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy  ADDITIONAL CO	& Certificate of Status
		ADDITIONAL CO	A I REQUIRED
FROM:	Namo	e (Printed or typed)	
		Address	<del></del>
	Сіту.	State & Zip	
_	Daytime Telephone number		
	E-mail address: (to be used	d for future annual report n	iotification)

NOTE: Please provide the original and one copy of the articles.

ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

FILED

The name of the corporat	ion shall be: Thach Batter	ry Ventures, Inc.		
ARTICLE II PRINC	IPAL OFFICE		2020 SEP 28 AM 9: 51	
	Principal street address	М	ailing address; if different isty CF STATE	
2557 Twain D			Antique Barn Averhoote. FL	
Tallahasse FL	32311	Cumming GA 30041		
ARTICLE III PURPOSE The purpose for which the corporation is organized is:		Any and All Legal Purposes		
	tock is: 10000000	<u>TORS</u>	Lorrin Thach / SD	
Name and Title	Trent Thach / PTD	Name and Title:		
Address	2557 Twain Drive	Address:	2557 Twain Drive	
	Tallahassee FL 32311		Tallahassee FL 32311	
Name and Title		Manager of Wide		
			<del></del>	
Address				
			·	
Name and Title:		Name and Title:		
Address		Address:		

Name and Title:		Name and Title:	
Address		Address:	
	·		
	REGISTERED AGENT		
The <u>name and F</u> Name:	Trent Thach  [P.O. Box NOT acceptable]	) of the registered agent is:	
Address:	2557 Twain Drive Tallahassee FL 32311	<u> </u>	S 2
			NN SEP 28 SECINEDAN
ARTICLE VII	<u>INCORPORATOR</u>		ه یست شر
The name and a	ddress of the Incorporator is:		ASSEE OF S
Name:	Laura Moyer		AM 9: 51 OF STAT SSEE, FL
Address:	1180 Welsh Rd., Suite 280	<u> </u>	- A -
	North Wales PA 19454	_	
Effective date, if	EFFECTIVE DATE: Tother than the date of filing:  date is listed, the date must be specific and can	. (OPTIONAL) inot be more than five days prior o	or 90 days after the
Note: If the date	e inserted in this block does not meet the applical effective date on the Department of State's record		date will not be listed as
Having been nan certificate, I am j	ned as registered agent to accept service of proces familia <u>r with a</u> nd accept the appointment as regis	s for the above stated corporation at t tered agent and agree to act in this c	the place designated in this apacity
	Irm there	9	/28/2020
	Required Signature/Registered Agent		Date
	cument and affirm that the facts stated herein a Departneyt of State of negitutes a third degree fel		
	Haura Woren	į	9/24/2020
Required Signatu	be/Incorporator	Date	<del></del>